

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>rw</i>	<i>689904</i>	<i>10/25/02</i>
O.I.P.E. CLASSIFIER		<i>11/6</i>	
FORMALITY REVIEW	<i>fr</i>	<i>861127-00</i>	<i>11-24-02</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N
 = Allowed I
 - (Through numeral)..... Canceled A
 ÷ Restricted O

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
1	<i>09/05/03</i>
2	<i>3-05-03</i>
3	<i>12-05-03</i>
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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